

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SEARCH NO. <u>1091547663</u>	FILING DATE				
						APPLICANT(S)					
						CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DE
IND.	DEP.	IND.	DEP.	IND.	DEP.						
1						51					
2		1		1		52					
3		1		1		53					
4		3		1		54					
5		3		1		55					
6		3		1		56					
7		3		1		57					
8	1	3		1		58					
9		1		1		59					
10		1		1		60					
11		3		3		61					
12		3		3		62					
13		1		1		63					
14		3		1		64					
15	1	3		1		65					
16	1	1		1		66					
17		3		3		67					
18		2		1		68					
19				1		69					
20				1		70					
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48						98					
49						99					
50						100					
TOTAL IND.		4		5		TOTAL IND.					
TOTAL DEP.		32	→	19	→	TOTAL DEP.					
TOTAL CLAIMS		36		24		TOTAL CLAIMS					

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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